| PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2001 | | | | | | | | | Application or Docket Number /0/ 073657 460 -9954456 | | | | | |
|---|--|---|----------------|------------------|--------------|------------------|-----|--------------------|--|----------|---------------------|-----------------|--|--|
| CLAIMS AS FILED - PART I | | | | | | | | | | • | | | | |
| | | | (Colum | n 1) | (Column 2) | | | SMALL ENTITY TYPE | | OTHER TH | | | | |
| TOTAL CLAIMS | | | 4/ | | | | | RATE | FEE | 7 | RATE | FEE | | |
| FOR | | | NUMBER FILED | | NUMBER EXTRA | | | BASIC FE | E 370.00 | OR | | | | |
| TOTAL CHARGEABLE CLAIMS | | | # minus 20= | | • | | | X\$ 9= | | OR | X\$18= | 7.0.00 | | |
| INDEPENDENT CLAIMS | | | / minus 3 = | | ·_ | | | X42= | _ | - | X84= | | | |
| Mi | JLTIPLE DEPE | NDENT CLAIM F | RESENT | | | | | 74720 | ╂ | OR | X04= | | | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | | | +140= | <u> </u> | OR | +280= | | | |
| | | | | | | | | TOTAL | | OR | TOTAL | 747 | | |
| CLAIMS AS AMENDED - PART II (g-75-0-3) (Column 1) (Column 2) (Column 3) | | | | | | | , | CHALL | ENTITY. | | OTHER | | | |
| | CLAIMS | | | HIGH | HEST | | ו ר | SMALL | ENTITY | OR 1 | SMALL | | | |
| AMENDMENT A | | REMAINING AFTER AMENDMENT | | PREVIO | USLY | PRESENT EXTRA | | RATE | ADDI- TIONAL | | RATE | ADDI- TIONAL | | |
| | Total | · 20 | Minus | PAID | 7 | + | } | | FEE | 1. | | FEE | | |
| | Independent | | Minus | - 7 | | • | | X\$ 9= | | OR | X\$18= | | | |
| | | ENTATION OF M | | 1 | CLAIM | . L | | X42= | | OR | X84= | | | |
| | | | | | | | | +140= | | OR | +280= | | | |
| 415-01 | | | | | | | | TOTAL DOIT, FEE | | OR | TOTAL ADDIT, FEE | | | |
| | | (Column 1) | | (Colun | m 2) | (Column 3) | | | | • ' | OUII. FEE | | | |
| AMENOMENT B | | CLAIMS REMAINING | | HIGH | | PRESENT | Γ | | ADDI- | l | | ADDI- | | |
| | | AFTER AMENDMENT | | PREVIO PAID F | | EXTRA | | RATE | TIONAL FEE | | RATE | TIONAL | | |
| | Total | . 20 | Minus | - 4 | 7 | . · | | X\$ 9= | , , , , | OR | X\$18= | FEE | | |
| | Independent | • | Minus | L | | | Ì | X42= | | | X84= | | | |
| | FIRST PRESE | NTATION OF MI | ILTIPLE DEI | PENDENT | CLAIM | | ŀ | | | OR | ~~~ | | | |
| BEST AVAILABLE COPY | | | | | | | | +140= | | OR | +280= | | | |
| 12/1/01/ | | | | | | | | TOTAL DOIT. FEE | | OR A | TOTAL ODIT. FEE | | | |
| مل | 2/16/04 | | | (Colum | | (Column 3) | | | | | | | | |
| ပ | | CLAIMS REMAINING | | HIGHE NUMB | ER | PRESENT | Γ | | ADDI- | ſ | 1 | ADDI- | | |
| 홌 | | AFTER AMENDMENT | | PREVIO | | EXTRA | | RATE | TIONAL FEE | l | RATE | TIONAL | | |
| | Total | .20 | Minus | . <i>4</i> | 7 | | T | X\$ 9= | | <u>.</u> | X\$18= | FEE | | |
| | Independent | • | Minus | dete | Ú | • | H | | | OR | | | | |
| <u> </u> | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | L | X42= | | OR | X84= | | | |
| +140= OR +280= | | | | | | | | | | | | ı | | |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Provinces Peril For IN THIS SPACE is less than 20 order 20." | | | | | | | | | | | | | | |
| | the "Highest Nur | nber Previously Paid ber Previously Paid | id For' IN THI | S SPACE is | less than | 1 3, enter "3." | | OIT. FEE | | A | DOIT. FEE L | | | |
| • | | | , a jour o | | -, 0.0 | | | an nea emb | obusta pox | un COIUI | mi 1. | 1 | | |